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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF IOWA	-	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Camilla First name Genora Middle name Whitaker Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6189	

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Case number (if known)

Debtor 1 Camilla Genora Whitaker

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 700 Argyle Court Clinton, IA 52732 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Clinton County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Camilla Genora Whitaker

Case number (if known)

Par	t 2: Tell the Court About	Your Ba	ankruptcy Ca	se					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	Chapter 7							
		☐ Ch	napter 11						
		☐ Ch	napter 12						
		☐ Ch	napter 13						
8.	How you will pay the fee		I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more deta about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or mon order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check water pre-printed address.						
			I need to pay	the fee in installments. If ye		e this option, sign	and attach the Applica	ation for Individuals to Pay	
		_	_	e in Installments (Official Form		dhia andian andi.i	f and filling for Ohan	stan 7. Declare a lector and	
		_	but is not requ	t my fee be waived (You ma uired to, waive your fee, and r	nay do so	only if your inco	me is less than 150% of	of the official poverty line that	
				r family size and you are una n to Have the Chapter 7 Filing					
			ano rippinoano	The riave the enapter r riming	9 1 00 110	rroa (Omolari ol	m 1005) and me it was	your pounom.	
9.	Have you filed for bankruptcy within the last 8 years?	□ No. ■ Yes							
	•			USBK Court Northern					
			District	IL Chicago	When	9/12/15	Case number	15-31164	
			District		When		Case number		
			District		When		Case number		
10.	Are any bankruptcy	■ No							
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes	S.						
			Debtor				Relationship to y	ou	
			District		When		Case number, if	known	
			Debtor				Relationship to y	rou	
			District		_ When		Case number, if	known	
11.	Do you rent your	□ No.	Go to li	ne 12.					
• • •	residence?	_		ur landlord obtained an eviction	on judam	ent against you?			
		■ Yes	5.		on jaagiii	om agamot you!			
			_	No. Go to line 12.					
				Yes. Fill out <i>Initial Statement</i> bankruptcy petition.	: About ar	Eviction Judgme	ent Against You (Form	101A) and file it with this	

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Debtor 1 Camilla Genora Whitaker

Case number (if known)

Par	t 3: Report About Any Bu	sinesses	You Own	as a Sole Proprie	tor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of bus	iness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.						
	If you have more than one sole proprietorship, use a		Numb	er, Street, City, Stat	e & ZIP Code		
	separate sheet and attach it to this petition.		Check	k the appropriate bo	x to describe your business:		
				Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))		
			Estate (as defined in 11 U.S.C. § 101(51B))				
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))		
☐ Commodity Broker (as defined in 11 to					r (as defined in 11 U.S.C. § 101(6))		
☐ None of the ab							
Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you				court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure			
		■ No.	I am n	ot filing under Chap	oter 11.		
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in Code.				
		☐ Yes.	I am f	lling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	Have Anv	Hazardo	us Property or An	y Property That Needs Immediate Attention		
	Do you own or have any				,		
• • •	property that poses or is	No.					
	alleged to pose a threat of imminent and identifiable hazard to public health or safety?	☐ Yes.	What is	the hazard?			
	Or do you own any property that needs immediate attention?			liate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?			
					Number, Street, City, State & Zip Code		

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Debtor 1 Camilla Genora Whitaker

Case number (if known)

15. Tell the court who

Part 5:

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Camilla Ge	nora Whitaker	Document	Page 6 of 45 Case number	EF (if known)				
Pari	t 6: Answer These	e Questions for R	eporting Purposes						
	What kind of debts you have?		Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by a individual primarily for a personal, family, or household purpose."						
	•		☐ No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you owe that	at are not consumer debts or busines	es debts				
17.	Are you filing und	er 🗆 No.	I am not filing under Chapter 7. Go	to line 18.					
	Do you estimate the after any exempt property is exclude	■ res.		I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expense are paid that funds will be available to distribute to unsecured creditors?					
	administrative exp		■ No						
	be available for distribution to uns creditors?		☐ Yes						
18.	How many Creditor	VOII - 1-43		□ 1,000-5,000 □ 5001-10,000	□ 25,001-50,000 □ 50,001-100,000				
	owe?	□ 50-99 □ 100-1 □ 200-9	99	☐ 10,001-25,000	☐ More than100,000				
19.	How much do you estimate your asso be worth?	ets to □ \$50,0 □ \$100,	550,000 101 - \$100,000 1001 - \$500,000 1001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion				
20.	How much do you estimate your liabit to be?	ilities ☐ \$50,0 ☐ \$100,	550,000 001 - \$100,000 001 - \$500,000 001 - \$1 million	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion				
Part	Sign Below								
For	you	I have ex	camined this petition, and I declare u	nder penalty of perjury that the inform	nation provided is true and correct.				
			chosen to file under Chapter 7, I am tates Code. I understand the relief a		under Chapter 7, 11,12, or 13 of title 11, noose to proceed under Chapter 7.				
			rney represents me and I did not pay nt, I have obtained and read the notic		at an attorney to help me fill out this				
		I request	relief in accordance with the chapte	r of title 11, United States Code, spec	cified in this petition.				
		bankrupt and 357	cy case can result in fines up to \$250 1.		or property by fraud in connection with a vears, or both. 18 U.S.C. §§ 152, 1341, 1519,				
			illa Genora Whitaker ı Genora Whitaker	Signature of Debto	r 2				
			e of Debtor 1	Jigilatare di Dobio	. –				

Executed on

MM / DD / YYYY

Executed on February 16, 2019
MM / DD / YYYY

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Debtor 1 Camilla Genora Whitaker

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Mary Ly	ynn Wolfe	Date	February 16, 2019
Signature of	Attorney for Debtor		MM / DD / YYYY
Mary Lynn	Wolfe IS9998962		
	AW OFFICE		
	Avenue South		
Clinton, IA	52732		
Number, Street,	City, State & ZIP Code		
Contact phone	563-243-4652	Email address	wolfelawbk@aol.com
IS9998962	·		
Darnumhar 9 C			

	Case	19-00203-8137	Doc 1 Tiled 02 Docume	ent Page 8 of 45	J Desi	Jiviaiii
Fill	in this inforr	nation to identify your				
Del	otor 1	Camilla Genora V	Vhitaker			
D-1	-4 0	First Name	Middle Name	Last Name		
	otor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT	OF IOWA		
Cas	se number					
(if kn	nown)				_	if this is an
					amend	ded filing
○ f	ficial Ec	rm 106Cum				
		rm 106Sum of Your Assets:	and I iahilities an	d Certain Statistical Information		2/15
				are filing together, both are equally responsible f		
info	rmation. Fill	out all of your schedul	es first; then complete th	e information on this form. If you are filing amend the box at the top of this page.		
Par		arize Your Assets	non cammary and onco.	tino box at the top of time page.		
rai	t i. Suillilli	arize rour Assets				
					Your as	ssets f what you own
1.	Schedule A	/B: Property (Official F	orm 106A/B)			
	1a. Copy lin	e 55, Total real estate, f	rom Schedule A/B		\$	0.00
	1b. Copy lin	e 62, Total personal pro	perty, from Schedule A/B		\$	1,600.00
	1c. Copy lin	e 63, Total of all propert	y on Schedule A/B		\$	1,600.00
Par	t 2: Summ	arize Your Liabilities				
					Your li	abilities
						you owe
2.			laims Secured by Property		¢	0.00
		•		he bottom of the last page of Part 1 of Schedule D	\$	0.00
3.			Unsecured Claims (Official 1 (priority unsecured claims	Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy th	ne total claims from Part	2 (nonpriority unsecured cl	aims) from line 6j of <i>Schedule E/F</i>	\$	15,076.00
	.,		` '	,		,
				Your total liabilities	\$	15,076.00
Par	t 3: Summ	arize Your Income and	Expenses			
4.		Your Income (Official Fo		,	\$	1,729.00
				I	Ψ	1,1 20.00
5.	Schedule J: Copy your n	Your Expenses (Officia nonthly expenses from li	I Form 106J) ine 22c of <i>Schedule J</i>		\$	1,641.00
Par			Administrative and Statis			
6.	-	•	er Chapters 7, 11, or 13?	neck this box and submit this form to the court with yo	our other sch	edules.

- Yes
- What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Camilla Genora Whitaker

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

1,752.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total claim	
From Part 4 on Schedule E/F, copy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

			Document	Page 10 of 45		
Fill in th	is informa	tion to identify your	case and this filing:			
Debtor 1		Camilla Genora V	Vhitaker			
		First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if t		First Name	Middle Name	Last Name		
United S	tates Bankı	ruptcy Court for the:	SOUTHERN DISTRICT OF IOW	/A		
Case nur	mher					Observativity in the control of the
Case nui						☐ Check if this is an amended filing
Officia	al Forr	n 106A/B				
Sche	edule	A/B: Prop	erty			12/15
think it fits informatio	s best. Be a	s complete and accura pace is needed, attach	e items. List an asset only once. If ate as possible. If two married peopl a separate sheet to this form. On the	e are filing together, both a	are equally responsible for	supplying correct
Part 1:	Describe Ea	ch Residence, Building	g, Land, or Other Real Estate You Ov	wn or Have an Interest In		
1. Do you	own or hav	e any legal or equitable	e interest in any residence, building	, land, or similar property?	•	
■ No. 0	Go to Part 2.					
☐ Yes.	Where is th	e property?				
Part 2:	Describe Yo	ur Vehicles				
	vans, trucl	•	le, also report it on Schedule G: E	xecutory Contracts and U	Jnexpired Leases.	
3.1 Ma	ake: Do	dge	Who has an interest in the	e property? Check one		d claims or exemptions. Put cured claims on Schedule D:
Мо		ravan	■ Debtor 1 only			Claims Secured by Property.
	ear: 200 proximate m		Debtor 2 only Debtor 1 and Debtor 2	only	Current value of the entire property?	Current value of the portion you own?
	ther informat		At least one of the debt	•	omme proposity.	,
Fa	air conditi	ion	Check if this is comm (see instructions)	unity property	\$800.00	\$800.00
■ No □ Yes 5 Add t .pages	he dollar v s you have	trailers, motors, personal ralue of the portion ye attached for Part 2.	TVs and other recreational vehional watercraft, fishing vessels, sready over the second of the secon	nowmobiles, motorcycle a	accessories ny entries for	\$800.00 Current value of the portion you own? Do not deduct secured
6. House		ls and furnishings	, linens, china, kitchenware			claims or exemptions.

Official Form 106A/B Schedule A/B: Property

□ No

Document Page 11 of 45 Case number (if known) Debtor 1 Camilla Genora Whitaker Yes. Describe..... \$500.00 Furniture and other household goods 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Clothes belonging to debtor and her children \$300.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$800.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ Yes..... Official Form 106A/B Schedule A/B: Property

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Doc 1

Filed 02/16/19

Entered 02/16/19 17:24:25

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Document Page 12 of 45 Camilla Genora Whitaker Case number (if known) Debtor 1 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... Chase \$0.00 Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No ☐ Yes. Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☐ Yes. Give specific information about them...

Money or property owed to you? Current value of the

Schedule A/B: Property

page 3

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		portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you	
	■ No	
	☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years	
29.	Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property sett	lement
	■ No □ Yes. Give specific information	
30.	Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensat benefits; unpaid loans you made to someone else No	ion, Social Security
	Yes. Give specific information	
31.	Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No	
	☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary:	Surrender or refund value:
32.	Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive someone has died. ■ No ☐ Yes. Give specific information	property because
33.	Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue □ No	
	■ Yes. Describe each claim	
	Possible claim against City of Clinton for injuries sustained in a fall on city property on February 13th.	Unknown
34.	Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set No Yes. Describe each claim	off claims
35.	Any financial assets you did not already list ■ No □ Yes. Give specific information	
36	5. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	\$0.00
Pa	rt 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
	Do you own or have any legal or equitable interest in any business-related property?	
	No. Go to Part 6.	
	\square Yes. Go to line 38.	

Official Form 106A/B Schedule A/B: Property page 4

Case 19-00265-als7 Doc 1 Filed 02/16/19 Entered 02/16/19 17:24:25 Document Page 14 of 45 Case number (if known) Debtor 1 Camilla Genora Whitaker Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$800.00 57. Part 3: Total personal and household items, line 15 \$800.00 Part 4: Total financial assets, line 36 \$0.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00

\$1,600.00

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 5

62. Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$1,600.00

\$1,600.00

	Ousc	10 00200 4101 100	Document	5, ± 5	Page 15 of 45	.2-1.20	Desc Main		
Fil	l in this inform	nation to identify your case:							
De	btor 1	Camilla Genora Whitak	er						
D -	h O	First Name	Middle Name	L	ast Name				
	btor 2 ouse if, filing)	First Name	Middle Name	L	ast Name				
Un	ited States Bar	nkruptcy Court for the: SOU	THERN DISTRICT OF	IOWA	i.				
റം	se number								
	nown)						Check if this is an amended filing		
Ol	fficial Fo	rm 106C							
S	chedule	e C: The Prope	rty You Cla	im	as Exempt		4/16		
the nee	property you lis	sted on <i>Schedule A/B: Propert</i> yd attach to this page as many c	(Official Form 106A/B)	as yo	ther, both are equally responsible for our source, list the property that you age as necessary. On the top of any	claim as ex	empt. If more space is		
spe any un exe	cific dollar an applicable st ds—may be u mption to a pa	nount as exempt. Alternativel atutory limit. Some exemptio nlimited in dollar amount. Ho	y, you may claim the f ns—such as those for wever, if you claim an	full fai healt exen	ount of the exemption you claim. ir market value of the property be th aids, rights to receive certain be uption of 100% of fair market valudetermined to exceed that amoun	ing exempt enefits, and e under a la	ed up to the amount of d tax-exempt retirement aw that limits the		
		y the Property You Claim as	Exempt						
		exemptions are you claiming		n if vo	our spouse is filing with you				
	_	aiming state and federal nonba	•	•	, ,				
	_	· ·	. , .	11 0.0	3.0. g 322(b)(3)				
^		aiming federal exemptions. 11	- , , , ,		fill in the information below				
۷.			<u> </u>	•	fill in the information below.	Cassific Is	wa that allow avamention		
		on of the property and line on that lists this property	Current value of the portion you own	• •			Specific laws that allow exemption		
			Copy the value from Check only one box for each exemption. Schedule A/B						
		e Caravan 160000 miles	\$800.00		\$800.00	Iowa Co	de § 627.6(9)		
	Fair conditi	on nedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit				
		nd other household goods	s \$500.00		\$500.00	Iowa Co	de § 627.6(5)		
	Line nom Scr	ledule AVB. G. 1			100% of fair market value, up to any applicable statutory limit				
	Clothes bel	onging to debtor and her	\$300.00		\$300.00	Iowa Co	de § 627.6(5)		
		nedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit				
3.		ning a homestead exemption ljustment on 4/01/19 and every			led on or after the date of adjustmen	nt.)			

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

		2,111,111,11	10 1000 10 00 10	
Fill in this infor	mation to identify your	case:		
Debtor 1	Camilla Genora V	Vhitaker		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF IOWA	
Case number				
(if known)				☐ Check if this is a amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

	Ouse .	10 00200 alsi	1 000	Document	Page 1	7 of 45	710 17.24.20	7000 Main
Fill in	this informa	ation to identify your						
Debto	or 1	Camilla Genora W	/hitaker					
20210		First Name	Middle Na	ame	Last Name			
Debto								
(Spouse	e if, filing)	First Name	Middle Na	ame	Last Name			
United	d States Bank	cruptcy Court for the:	SOUTHERN	DISTRICT OF I	OWA			
Case	number							
(if know				=				Check if this is an
							a	mended filing
Offic	ial Form	106E/E						
		F: Creditors W	ho Havo	Uneocuro	l Claime			12/15
						Part 2 for araditor	ro with NONDRIORITY alsi	ms. List the other party to
Schedu left. Att name a	ule D: Creditor tach the Conti and case numb	s Who Have Claims Sec nuation Page to this pag per (if known).	ured by Propert e. If you have n	y. If more space is o information to r	s needed, copy t	he Part you need	h partially secured claims I, fill it out, number the en irt. On the top of any addi	tries in the boxes on the
Part 1		of Your PRIORITY Un						
_		s have priority unsecure	d claims agains	st you?				
	No. Go to Par	t 2.						
	Yes.			.				
Part 2		of Your NONPRIORIT						
3. Do	o any creditors	s have nonpriority unsec	ured claims ag	ainst you?				
	No. You have	nothing to report in this p	art. Submit this f	orm to the court wit	h your other sche	edules.		
	Yes.							
un tha	secured claim,	list the creditor separately	for each claim.	For each claim liste	ed, identify what t	ype of claim it is. I	n. If a creditor has more that Do not list claims already incursecured claims fill out the	cluded in Part 1. If more
								Total claim
4.1	Alliant Er	nergy		Last 4 digits of ac	count number	1184		\$5,000.00
		Creditor's Name		W/	L4 ! 10	2040 2040		
	PO Box 3 Cedar Ra	1900 1910s, IA 52406-306	0	When was the del	ot incurred?	2018-2019		_
		eet City State Zip Code		As of the date you	u file, the claim i	s: Check all that a	pply	
	Who incurre	ed the debt? Check one.						
	Debtor 1	only		☐ Contingent				
	Debtor 2	only		☐ Unliquidated				
	Debtor 1	and Debtor 2 only		☐ Disputed				
	☐ At least of	one of the debtors and and	other	Type of NONPRIC	RITY unsecured	d claim:		
		this claim is for a comm	•	☐ Student loans				
	debt Is the claim	subject to offset?		☐ Obligations aris	•	ration agreement	or divorce that you did not	
	■ No	•		Debts to pension		g plans, and other	similar debts	
	☐ Yes			Other. Specify	Heat and el	ectricity		
				Caron Opcomy		•		

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Debtor 1 Camilla Genora Whitaker ase number (if known) \$1,000.00 4.2 City of Clinton Sewer Last 4 digits of account number 2274 Nonpriority Creditor's Name P.O. Box 2958 When was the debt incurred? Through February 15, 2019 611 South 3rd Street Clinton, IA 52733-2958 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Sewer services Other. Specify 4.3 **ComEd Customer Care Center** Last 4 digits of account number Unknown Nonpriority Creditor's Name POB 805379 When was the debt incurred? 2013-2016 Chicago, IL 60680 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Old unpaid electric bills ☐ Yes 4.4 **Credit Collection Services** Last 4 digits of account number \$400.00 6725 Nonpriority Creditor's Name **PO Box 607** When was the debt incurred? 2017 Norwood, MA 02062 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No Accrued premiums owed to Progressive

☐ Yes

■ Other. Specify Auto Insurance

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Debtor 1 Camilla Genora Whitaker ase number (if known) \$205.00 4.5 **Iowa American Water** Last 4 digits of account number 0228 Nonpriority Creditor's Name PO Box 3027 When was the debt incurred? 2019 Milwaukee, WI 53201-3027 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Apprpoximately 3 months of water ☐ Yes 4.6 \$271.00 Mediacom Last 4 digits of account number 0991 Nonpriority Creditor's Name 115 S. 2nd Street When was the debt incurred? 2019 Clinton, IA 52732 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Π Yes Two months of cable Other. Specify 4.7 **Mercy Home Medical Equipment** Last 4 digits of account number \$900.00 unknown Nonpriority Creditor's Name 638 South Bluff Blvd When was the debt incurred? 2017-2018 Clinton, IA 52732-4742 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Medical equiptment that should have been ☐ Yes Other Specify paid for by Medicaid

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Debtor	1 Camilla Genora Whitaker	——————————————————————————————————————	Case number (if known)				
4.8	Mercy Medical Center	Last 4 digits of account number	1980	\$800.00			
	Nonpriority Creditor's Name Mercy Health Network 1410 North Fourth Street Clinton, IA 52732-2940	When was the debt incurred?	2017-2018				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Medical del	ot - disputed by debtor				
4.9	Peoples Gas	Last 4 digits of account number		Unknown			
	Nonpriority Creditor's Name Attn: Customer Service 200 E Randolph	When was the debt incurred?	2013-3016				
	Chicago, IL 60601 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Old gas bill	s				
4.1	Portfolio Recovery Associates LLC Nonpriority Creditor's Name	Last 4 digits of account number	Unkown	Unknown			
	120 Corporate Blvd Suite 141 Norfolk, VA 23502	When was the debt incurred?	2017 and prior				
•	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	_					
	■ Debtor 1 only	Contingent					
	Debtor 2 only	Unliquidated					
	Debtor 1 and Debtor 2 only	Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	ı cıanın:				
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debts				
	☐ Yes	Other. Specify Old debt pt	irchased by factoring company				

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Debto	Camilla Genora Whitaker	Document Page 21 of 45 Case number (if known)	
4.1	Progressive Leasing LLC	Last 4 digits of account number	\$1,200.00
	Nonpriority Creditor's Name 256 W Data Drive Draper, UT 84020	When was the debt incurred? 2017	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other Specify	
4.1 2	Total Finance	Last 4 digits of account number 1752	\$5,000.00
	Nonpriority Creditor's Name 3400 North Pulaski Road Chicago, IL 60641	When was the debt incurred? 5/2014	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Other. Sp	
4.1	Webbank/Fresh start	Last 4 digits of account number 0255	\$300.00
	Nonpriority Creditor's Name 6250 Ridgewood ROA Saint Cloud, MN 56303	When was the debt incurred? 2013	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	-		

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

 \square Check if this claim is for a community debt

Is the claim subject to offset?

■ No

☐ Yes

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

 \square Obligations arising out of a separation agreement or divorce that you did not

report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Old credit card debt

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Camilla Genora Whitaker	Document	Case number (if known)
Name and Address AAMS 4800 Mills Civic Parkway Suite 202 West Des Moines, IA 50265-5265	On which entry in Part 1 or Line 4.8 of (Check one): Last 4 digits of account num	Part 2 did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Alliant Energy 2001 Beaver Parkway Clinton, IA 52732		Part 2 did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Alliant Energy 200 First Street SE PO Box 351 Cedar Rapids, IA 52406	On which entry in Part 1 or Line 4.1 of (Check one): Last 4 digits of account num	Part 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address H & R Accounts Inc 5320 22nd Avenue PO Box 672 Moline, IL 61266-0672	On which entry in Part 1 or Line 4.7 of (Check one): Last 4 digits of account num	Part 2 did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims nber 1002
Name and Address Mediacom 3900 26th Avenue Moline, IL 61265-4956	On which entry in Part 1 or Line 4.6 of (Check one): Last 4 digits of account num	Part 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims nber
Name and Address Progressive Insurance 6300 Wilson Mills Rd. Cleveland, OH 44143	On which entry in Part 1 or Line 4.4 of (Check one): Last 4 digits of account num	Part 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims nber

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 15,076.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 15,076.00

Fill in this infor				
Debtor 1	Camilla Genora V	Vhitaker		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF IOWA	
Case number				
(if known)				☐ Check if this is
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u>=</u>
2.3	-				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	-

		Docume	ent Page 24 d	of 45	
Fill in thi	s information to identify your	case:			
Dalata a 4					
Debtor 1	Camilla Genora \ First Name	Whitaker Middle Name	Last Name		
Dobtor 2	i iist ivaine	Wildule Name	Last Name		
Debtor 2 (Spouse if, fi	iling) First Name	Middle Name	Last Name		
(9)				
United St	ates Bankruptcy Court for the:	SOUTHERN DISTRICT	OF IOWA		
_					
Case nun (if known)	nber				☐ Check if this is an
(ii itilowii)					☐ Check if this is an amended filing
					amended ming
Officia	al Form 106H				
Sche	dule H: Your Cod	lebtors			12/15
our nam	e and case number (if known). Answer every question	.		p of any Additional Pages, write
1. Do	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	e as a codebtor.	
■ No					
□Ye	9S				
	thin the last 8 years, have yo				
Arizo	na, California, Idaho, Louisiana	a, Nevada, New Mexico, Pu	ierto Rico, Texas, Wash	lington, and Wisconsin.)	
■ No	o. Go to line 3.				
⊔ те	es. Did your spouse, former spo	buse, or legal equivalent live	e with you at the time?		
in lin Form	ie 2 again as a codebtor only n 106D), Schedule E/F (Officia	if that person is a guaran	tor or cosigner. Make	sure you have listed t	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
out C	Column 2.				
	Column 1: Your codebtor				editor to whom you owe the debt
	Name, Number, Street, City, State and Z	ZIP Code		Check all schedule	es that apply:
0.4				Па	
3.1	Name			Schedule D, lin	
	Name			☐ Schedule E/F,	
				☐ Schedule G, lir	ne
	Number Street				
	City	State	ZIP Code		
0.0				По	
3.2	Name			Schedule D, lin	
	i vaino			☐ Schedule E/F,	
				☐ Schedule G, lir	ne
	Number Street			_	
	City	State	ZIP Code		

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EIII	in this information to ider	otify your c	asa.				I				
			ora Whitaker								
	btor 2 buse, if filing)					_					
Uni	ited States Bankruptcy C	ourt for the	: SOUTHERN DISTRIC	CT OF IOWA							
	se number nown)			-			☐ A su	mended pplemen	t showing	g postpetition	chapter
0	fficial Form 10	<u>6l</u>					MM	/ DD/ YY	YY		
S	chedule I: You	ur Inc	ome								12/15
spo atta Par	use. If you are separate ch a separate sheet to to tall. Describe Em	ed and you this form. ployment	are married and not filing wing the top of any addition the top of any addition	th you, do not inclu	ude infor	mati	on about yo	ur spou	se. If mo	re space is	needed,
1.	Fill in your employme information.	ent		Debtor 1			De	ebtor 2 o	r non-fil	ing spouse	
	If you have more than attach a separate page information about addit	with	Employment status	☐ Employed ■ Not employed				l Employ			
	employers. Include part-time, seas self-employed work.	onal, or	Occupation Employer's name								
	Occupation may includ or homemaker, if it app		Employer's address								
			How long employed t	here?							
Par	rt 2: Give Details	About Mor	nthly Income								
spoo If yo	use unless you are separ	ated. se have mo	ore than one employer, co	-		-					
							For Debtor	r 1		otor 2 or ng spouse	
2.			ry, and commissions (b calculate what the monthl		2.	\$		0.00	\$	N/A	
3.	Estimate and list mor	nthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Incor	ne. Add lir	ne 2 + line 3.		4.	\$	0.0	00	\$	N/A	

Deb	otor 1	Camilla Genora Whitaker		С	ase nun	nber (<i>if kn</i>	own)			
	Com	vy line 4 hore	4		For De		.00		Debtor 2 or filing spouse	
		y line 4 here	4.		Φ	U	.00	Φ	N/A	
5.		all payroll deductions:	_			_		•		
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.		\$ \$.00	\$ \$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.		ֆ \$.00	\$ 	N/A N/A	
	5d.	Required repayments of retirement fund loans	5d.		\$.00	\$	N/A N/A	
	5e.	Insurance	5e.		ֆ \$.00	\$	N/A	
	5f.	Domestic support obligations	5f.		\$.00	\$ 	N/A	
	5g.	Union dues	5g.		\$.00	\$	N/A	
	5h.	Other deductions. Specify:	5h.		\$			+ \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	,	\$	0	.00	\$	N/A	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	(\$	0	.00	\$	N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		\$	0	.00	\$	N/A	
	8b.	Interest and dividends	8b.		\$	0	.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		 \$	0	.00	\$	N/A	
	8d.	Unemployment compensation	8d.		\$.00	\$	N/A	
	8e.	Social Security	8e.		\$.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Disability	_ 8f.		\$	777	.00	\$	N/A	
		Adoption Assistance			\$	952	.00	\$	N/A	
	8g.	Pension or retirement income	_ 8g.		\$.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.		\$.00	+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		1,729	.00	\$	N/A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	1,7	29.00	+ \$_		N/A = \$	1,729.00
11.	Stat Inclu	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your or friends or relatives. In the contribution of the	depe						chedule J.	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain lies							12. \$ Combin	1,729.00 led
13.	Do y	you expect an increase or decrease within the year after you file this form? No. Yes. Explain:	,						monthly	/ income

Fill	in this informa	tion to identify yo	our case:					
Deb	otor 1	Camilla Gen	ora Whita	aker		Che	ck if this is:	
	otor 2 ouse, if filing)						An amended filing A supplement show 13 expenses as of	ving postpetition chapter
` '	, 0,							d tollowing date.
Unit	ed States Bankr	uptcy Court for the	: SOUTH	ERN DISTRICT OF IOWA	<u> </u>		MM / DD / YYYY	
1	e number nown)							
Of	fficial Fo	rm 106J						
-		J: Your	•					12/1
info	ormation. If m		eded, atta	If two married people ar ch another sheet to this n.				
Par 1.	t 1: Descr	ibe Your House it case?	ehold					
	■ No. Go to		in a separ	ate household?				
	□N	0	·	al Form 106J-2, <i>Expense</i> s	for Separate House	ehold of Del	otor 2.	
2.	Do you have	e dependents?	□ No	,	•			
	Do not list Do Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Daughter		16	■ Yes □ No
					Daughter		17	■ Yes
					Son		19	□ No
					3011			■ Yes □ No
0	D		_					☐ Yes
3.	expenses of	enses include f people other t d your depende	han $_{m \Box}$	No Yes				
Est exp	imate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		n assistance an		government assistance i luded it on <i>Schedule I:</i> Y			Your expe	enses
4.		or home owners		ses for your residence. In	nclude first mortgag	e 4.	\$	0.00
	. ,	led in line 4:	o ground 0	1 101.				
						4 -	Φ	0.00
		estate taxes rty, homeowner's	s. or renter	's insurance		4a. 4b.	:	0.00 0.00
				pkeep expenses		4c.	·	0.00
		owner's associat				4d.	:	0.00
5.	Additional r	nortgage paym	ents for yo	our residence, such as ho	me equity loans	5.	\$	0.00

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Debtor 1 Camilla Genora Whitaker		Case num	ber (if known)	
6. Utilities:				
6a. Electricity, heat, natural gas		6a.	\$	500.00
6b. Water, sewer, garbage collection		6b.		200.00
6c. Telephone, cell phone, Internet, satellite, a	and cable services	6c.		200.00
6d. Other. Specify:	and dable dervices	6d.	·	0.00
7. Food and housekeeping supplies		— 7 .	\$	300.00
. Childcare and children's education costs		8.	\$	0.00
. Clothing, laundry, and dry cleaning		9.	\$	100.00
D. Personal care products and services			\$	
•		10.	·	25.00
Medical and dental expenses		11.	\$	0.00
2. Transportation. Include gas, maintenance, bus	or train fare.	12.	\$	200.00
Do not include car payments. B. Entertainment, clubs, recreation, newspapers	magazines and books	13.	\$	50.00
the state of the s			·	
L. Charitable contributions and religious donation	ons	14.	\$	0.00
5. Insurance.	var included in lines 4 or 20			
Do not include insurance deducted from your pay 15a. Life insurance	y or included in lines 4 of 20.	15a.	¢	0.00
15b. Health insurance		15a. 15b.		
			·	0.00
15c. Vehicle insurance		15c.	·	66.00
15d. Other insurance. Specify:		15d.	\$	0.00
5. Taxes. Do not include taxes deducted from your	pay or included in lines 4 or 20.		_	
Specify:		16.	\$	0.00
7. Installment or lease payments:			•	
17a. Car payments for Vehicle 1		17a.	·	0.00
17b. Car payments for Vehicle 2		17b.	·	0.00
17c. Other. Specify:		17c.	\$	0.00
17d. Other. Specify:		17d.	\$	0.00
Your payments of alimony, maintenance, and deducted from your pay on line 5, Schedule I.		 18.	\$	0.00
Other payments you make to support others			\$	0.00
Specify:	····· , · · · · · · · · · · · · · ·	19.	*	0.00
Other real property expenses not included in	lines 4 or 5 of this form or on Scheo		our Income.	
20a. Mortgages on other property	mics 4 of 6 of this form of on conce	20a.		0.00
20b. Real estate taxes		20b.	· -	0.00
20c. Property, homeowner's, or renter's insurar	200	20c.		0.00
			·	
20d. Maintenance, repair, and upkeep expense		20d.	·	0.00
20e. Homeowner's association or condominium	aues	20e.	·	0.00
. Other: Specify:		21.		0.00
2. Calculate your monthly expenses				
22a. Add lines 4 through 21.			\$	1,641.00
22b. Copy line 22 (monthly expenses for Debtor	2) if any from Official Form 106 L2		\$	1,041.00
22c. Add line 22a and 22b. The result is your mo	onthly expenses.		\$	1,641.00
3. Calculate your monthly net income.				
23a. Copy line 12 (your combined monthly inco	me) from Schedule I	23a.	\$	1,729.00
23b. Copy your monthly expenses from line 22c		23b.	· -	1,641.00
200. Copy your morning expenses from line 220	, 450.0.	200.		1,041.00
23c. Subtract your monthly expenses from your	monthly income			
The result is your <i>monthly net income</i> .	monthly moonto.	23c.	\$	88.00
count to jour monthly not moonto.			ļ	
4. Do you expect an increase or decrease in you	ır expenses within the year after vou	ı file this	form?	
For example, do you expect to finish paying for your car				ise or decrease because o
modification to the terms of your mortgage?				
■ No.				
□ Yes Explain here:				

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Fill in 4h	in information to identify your				
	is information to identify your				
Debtor 1	Camilla Genora V	Vnitaker Middle Name	Last Name		
Debtor 2		imade Hame	<u> </u>		
(Spouse if,		Middle Name	Last Name		
United S	tates Bankruptcy Court for the:	SOUTHERN DISTRIC	CT OF IOWA		
Case nui	mhar				
(if known)					☐ Check if this is an
					amended filing
You mus obtaining	arried people are filing togethe t file this form whenever you fi g money or property by fraud in both. 18 U.S.C. §§ 152, 1341, 1	ile bankruptcy schedul n connection with a ba	es or amended schedule	s. Making a false stateme	
	Sign Below				
Did	you pay or agree to pay some	one who is NOT an att	orney to help you fill out	bankruptcy forms?	
	No				
	Yes. Name of person				otcy Petition Preparer's Notice, and Signature (Official Form 119)
				Declaration, ar	a dignature (Omolai i Omi i 13)
	er penalty of perjury, I declare they are true and correct.	that I have read the su	mmary and schedules file	ed with this declaration a	and
x	/s/ Camilla Genora Whitake	ar.	X		
_	Camilla Genora Whitaker	<u>, 1</u>	Signature o	of Debtor 2	
	Signature of Debtor 1		- J		
	Date February 16, 2019		Date		

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Fill	in this infor	mation to identify you	r case:			
	otor 1	Camilla Genora				
20.	7.01	First Name	Middle Name	Last Name		
	otor 2 use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF IOWA		
	se number own)				-	Check if this is an amended filing
Sta Be a	atemen s complete rmation. If i	and accurate as possi	ble. If two married people attach a separate sheet to	iduals Filing for E are filing together, both are this form. On the top of ar	e equally responsible for su	
			rital Status and Where Yo	ou Lived Before		
1.	What is you	ur current marital statu	s?			
	■ Marrie■ Not ma					
2.	During the	last 3 years, have you	lived anywhere other than	n where you live now?		
	□ No ■ Yes. Li	ist all of the places you l	ived in the last 3 years. Do	not include where you live no	<i>N</i> .	
	Debtor 1 P	Prior Address:	Dates Debtor lived there	1 Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there
	2604 N 4 ⁻ Clinton, I	TH ST APT 105 A 52732	From-To: March 2017 t March 2018	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
	■ No □ Yes. M	ries include Arizona, Ca lake sure you fill out Scl	lifornia, Idaho, Louisiana, N	egal equivalent in a communevada, New Mexico, Puerto F Official Form 106H).		
Par 4.	Did you ha	tal amount of income yo	nployment or from operation of the contract of	ing a business during this y I all businesses, including par ve together, list it only once u	t-time activities.	endar years?
	■ No	ill in the details.	navo moome mat you recei	vo together, has it only once the	ndoi Dobiol 1.	
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

Case number (if known) Debtor 1 Camilla Genora Whitaker Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an ☐ No. individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? \square No. Go to line 7. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address **Dates of payment Total amount** Amount vou Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No ☐ Yes. List all payments to an insider. **Insider's Name and Address** Reason for this payment **Dates of payment Total amount** Amount you paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment Include creditor's name naid still owe

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Debtor 1 Camilla Genora Whitaker

Pa	rt 4: Identify Legal Actions, Repossess	sions, and Foreclosures			
9.	Within 1 year before you filed for bankru List all such matters, including personal inj modifications, and contract disputes.				
	■ No				
	Yes. Fill in the details.				
	Case title Case number	Nature of the case	Court or agency	Status of the	e case
10.	Within 1 year before you filed for bankru Check all that apply and fill in the details b		perty repossessed, foreclose	ed, garnished, attached	, seized, or levied?
	No. Go to line 11.Yes. Fill in the information below.				
	Creditor Name and Address	Describe the Property		Date	Value of the property
		Explain what happene	ed		
11.	Within 90 days before you filed for bank accounts or refuse to make a payment I ■ No □ Yes. Fill in the details.		cluding a bank or financial i	nstitution, set off any a	mounts from your
	Creditor Name and Address	Describe the action th	e creditor took	Date action was	Amount
				taken	
12.	Within 1 year before you filed for bankru court-appointed receiver, a custodian, c		erty in the possession of ar	assignee for the bene	fit of creditors, a
	No				
	☐ Yes				
Pa	tt 5: List Certain Gifts and Contribution	ns			
13.	Within 2 years before you filed for bank ■ No	ruptcy, did you give any gif	ts with a total value of more	than \$600 per person?	
	☐ Yes. Fill in the details for each gift.				
	Gifts with a total value of more than \$6 per person	00 Describe the gifts	3	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:	d			
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No				
	Yes. Fill in the details for each gift or				
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo	·	u contributed	Dates you contributed	Value
Pa	rt 6: List Certain Losses				
15.		uptcy or since you filed for	bankruptcy, did you lose an	ything because of theft	, fire, other disaster,
	■ No □ Yes. Fill in the details.				
	Describe the property you lost and	Describe any insurance of	overage for the loss	Date of your	Value of property
	how the loss occurred	Include the amount that ins	urance has paid. List pending of Schedule A/B: Property.	loss	lost

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Debtor 1 Camilla Genora Whitaker

	_		
Part 7:	List Certain	Payments	or Transfers

						
16.	6. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.				erty to anyone you	
	□ No ■ Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and v transferred	alue of any property		Date payment or transfer was made	Amount of payment
	WOLFE LAW OFFICE 337 4th Avenue South Clinton, IA 52732 wolfelawbk@aol.com	Attorney Fees S Filing fee \$335	\$800		January 2019	\$1,135.00
17.	Within 1 year before you filed for bankruptcy, or promised to help you deal with your creditors. Do not include any payment or transfer that you list. No Yes. Fill in the details.	or to make payments		half pay or	transfer any prope	erty to anyone who
	Person Who Was Paid Address	Description and v transferred	alue of any property		Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.					
	Person Who Received Transfer Address Person's relationship to you	Description and v property transferr	ed		ny property or eceived or debts nange	Date transfer was made
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device beneficiary? (These are often called asset-protection devices.) No Yes, Fill in the details.		t or similar device	of which you are a		
	Name of trust	Description and v	alue of the property	transferred	d	Date Transfer was made
Pai	t 8: List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and Storage	e Units		
 Within 1 year before you filed for bankruptcy, were any financial accounts or instruments sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of dehouses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. 						
	Name of Financial Institution and La	ast 4 digits of ecount number	Type of account or instrument	clos	e account was ed, sold, ed, or sferred	Last balance before closing or transfer

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Debtor 1 Camilla Genora Whitaker

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securcash, or other valuables?			ry for securities,	
	■ No			
	Yes. Fill in the details.			
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
22.	Have you stored property in a storage unit or p ■ No	lace other than your home within 1 y	year before you filed for bankruptcy?	•
	Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control for	Someone Else		
23.	Do you hold or control any property that some for someone.	one else owns? Include any property	y you borrowed from, are storing for	, or hold in trust
	■ No □ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	t 10: Give Details About Environmental Inform	ation		
For	the purpose of Part 10, the following definitions	apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these sui	ir, land, soil, surface water, ground	- ·	
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	defined under any environmental la	w, whether you now own, operate, o	or utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		waste, hazardous substance, toxic s	ubstance,
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of when	they occurred.	
24.	Has any governmental unit notified you that you	u may be liable or potentially liable u	under or in violation of an environme	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice

26.	Hav	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.					
		No					
		Yes. Fill in the details.					
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case	
Par	t 11:	Give Details About Your Business or	Connections to Any Business				
27.	With	nin 4 years before you filed for bankrup	tcv. did vou own a business or have a	anv of	the following connections to any	business?	
		☐ A sole proprietor or self-employed i		-			
		☐ A member of a limited liability comp	pany (LLC) or limited liability partners	hip (L	LP)		
		☐ A partner in a partnership					
	☐ An officer, director, or managing executive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation						
	■ No. None of the above applies. Go to Part 12.						
		Yes. Check all that apply above and fill in the details below for each business.					
		siness Name	Describe the nature of the business		Employer Identification number Do not include Social Security number or ITIN		
		dress nber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security in Dates business existed	iumber or ITIN.	
28.	Inst	nin 2 years before you filed for bankrup itutions, creditors, or other parties. No Yes. Fill in the details below. me dress nber, Street, City, State and ZIP Code)	tcy, did you give a financial statement	t to ar	nyone about your business? Inclu	de all financial	
Par	t 12:	Sign Below					
are t with 18 U	rue a ba I.S.C	ad the answers on this Statement of Finand correct. I understand that making a survey case can result in fines up to §§ 152, 1341, 1519, and 3571. Allia Genora Whitaker	false statement, concealing property	, or o	btaining money or property by fra		
Ca	milla	a Genora Whitaker re of Debtor 1	Signature of Debtor 2				
Dat	e <u></u>	February 16, 2019	Date				
Did ; ■ N □ Y	lo	attach additional pages to Your Stateme	ent of Financial Affairs for Individuals	s Filine	g for Bankruptcy (Official Form 10	7)?	
		pay or agree to pay someone who is no	t an attorney to help you fill out bankr	ruptcy	y forms?		
■ N		Jame of Person . Attach the <i>Bankru</i>	untcy Petition Preparer's Notice Declara	ition a	and Signature (Official Form 119)		
	JJ. 1			, u	<u>g (</u>		

Document

Debtor 1 Camilla Genora Whitaker

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Case number (if known)

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Fill in this infor	rmation to identify your	case:		
Debtor 1	Camilla Genora \	Whitaker		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF IOWA	
Case number				
(if known)				☐ Check if this is an amended filing
		on TOT INGIVIAL apter 7, you must fill out t	lals Filing Under	Chapter 7 12/15
	ve claims secured by yo	• • •		
You must file th	is form with the court versity ever is earlier, unless t		le your bankruptcy petition or	by the date set for the meeting of creditors, discopies to the creditors and lessors you list
	eople are filing togethe nd date the form.	er in a joint case, both are	equally responsible for supply	ring correct information. Both debtors must
	and accurate as possilyour name and case nu		led, attach a separate sheet to	this form. On the top of any additional pages
Part 1: List Y	our Creditors Who Hav	ve Secured Claims		
1. For any credi information b	•	Part 1 of Schedule D: Cred	litors Who Have Claims Secure	d by Property (Official Form 106D), fill in the

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1	Camilla Genora Whitaker	Case number (if known)	
name: Descrip property securing	у	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	☐ Yes
For any ur in the info	rmation below. Do not list real estate leases	ises isted in Schedule G: Executory Contracts and Unexpired s. Unexpired leases are leases that are still in effect; the se if the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.
Describe	your unexpired personal property leases		Will the lease be assumed?
Lessor's n Descriptio Property:	name: n of leased		□ No
Lessor's n Descriptio Property:	name: on of leased		□ No
Lessor's n Descriptio Property:	name: on of leased		□ No
Lessor's n Descriptio Property:	name: on of leased		□ No
Lessor's n Descriptio Property:	name: on of leased		□ No
Lessor's n Descriptio Property:	name: on of leased		□ No
Lessor's n Descriptio Property:	name: on of leased		□ No
Part 3: Under pen	Sign Below nalty of perjury, I declare that I have indicate	ed my intention about any property of my estate that sec	☐ Yes
	hat is subject to an unexpired lease. Camilla Genora Whitaker	X	
Cam	nilla Genora Whitaker ature of Debtor 1	Signature of Debtor 2	
Date	February 16, 2019	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7	':	Liquidation
\$2	245	filing fee
\$	75	administrative fee
+ \$	15	trustee surcharge
\$3	335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing tee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-00265-als7 Doc 1 Filed 02/16/19 Entered 02/16/19 17:24:25 Desc Main Document Page 42 of 45

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of Iowa

Disclosure of compensation paid to me was: Debtor Disclosure of the diling of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy, case is as follows: For legal services, I have agreed to accept \$ 800.00 Prior to the filling of this statement I have received \$ 800.00 Balance Due \$ 800.00 Balance Due \$ 800.00 Balance Due Other (specify): The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): In return for the above-disclosed compensation with any other person unless they are members and associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy: Dependent of the debtor of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; Colored provisions as needed Other provisions as needed	In r	e Camilla Genora Whitaker		Case No.			
1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept			Debtor(s)	Chapter	7		
compensation paid to me within one year before the filing of the petition in bankruptey, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptey case is as follows: For legal services, I have agreed to accept Prior to the filing of this statement I have received \$ 800.00 Balance Due \$ 0.00 S 0.00 The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): The source of compensation to be paid to me is: The source of compensation to be paid to me is: Poettor Other (specify): The source of compensation to be paid to me is: Accepted to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Terrify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. CERTIFICATION Leverify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. CERTIFICATION Leverify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. CERTIFICATION		DISCLOSURE OF COMP	PENSATION OF ATTOR	RNEY FOR DE	EBTOR(S)		
Prior to the filing of this statement I have received \$ 800.00 Balance Due \$ 0.00 S 335.00 of the filing fee has been paid. The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required: c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. February 16, 2019 Date Mary Lynn Wolfe Mary Lynn Wol	1.	compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to					
Prior to the filing of this statement I have received \$ 800.00 Balance Due \$ 0.00 S 335.00 of the filing fee has been paid. The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required: c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. February 16, 2019 Date Mary Lynn Wolfe Mary Lynn Wol		For legal services, I have agreed to accept		\$	800.00		
Balance Due		Prior to the filing of this statement I have receiv	ed	\$	800.00		
3. The source of the compensation paid to me was: ■ Debtor □ Other (specify): 4. The source of compensation to be paid to me is: ■ Debtor □ Other (specify): 5. ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. □ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] 7. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. Pebruary 16, 2019 Date All Mary Lynn Wolfe Sy9989862 Signature of Attorney WOLFE LAW OFFICE 337 4th AAvenue South Clinton, IA 52732 563-243-4652 Fax: 563-243-4750 wolfelawbk@aol.com					0.00		
■ Debtor □ Other (specify): 4. The source of compensation to be paid to me is: ■ Debtor □ Other (specify): 5. ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. □ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] 7. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. Signature of Attorney WOLFE LAW OFFICE Mary Lynn Wolfe Mary Lynn Wolfe Sy998962 Signature of Attorney WOLFE LAW OFFICE Sy374 the Advenue South Clinton, IA 52732 563-243-4652 Fax: 563-243-4750 Wolfelawbk@aol.com	2.	\$ 335.00 of the filing fee has been paid.					
4. The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] 7. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. Signature of Attorney WOLFE LAW OFFICE	3.	The source of the compensation paid to me was:					
Debtor		■ Debtor □ Other (specify):					
5. ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. □ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] 7. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. Signature of Attorney WOLFE LAW OFFICE	4.	The source of compensation to be paid to me is:					
□ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] 7. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. February 16, 2019		■ Debtor □ Other (specify):					
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a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] 7. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. February 16, 2019 Date Is/ Mary Lynn Wolfe						A	
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I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. February 16, 2019	7.	Representation of the debtors in any			es, relief from stay actions	s or	
this bankruptcy proceeding. February 16, 2019 Date Mary Lynn Wolfe Mary Lynn Wolfe IS9998962 Signature of Attorney WOLFE LAW OFFICE 337 4th AAvenue South Clinton, IA 52732 563-243-4652 Fax: 563-243-4750 wolfelawbk@aol.com			CERTIFICATION				
Mary Lynn Wolfe IS9998962 Signature of Attorney WOLFE LAW OFFICE 337 4th AAvenue South Clinton, IA 52732 563-243-4652 Fax: 563-243-4750 wolfelawbk@aol.com	this		any agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in	n	
Mary Lynn Wolfe IS9998962 Signature of Attorney WOLFE LAW OFFICE 337 4th AAvenue South Clinton, IA 52732 563-243-4652 Fax: 563-243-4750 wolfelawbk@aol.com	ı	February 16, 2019	/s/ Mary Lynn Wo	lfe			
WOLFE LAW OFFICE 337 4th AAvenue South Clinton, IA 52732 563-243-4652 Fax: 563-243-4750 wolfelawbk@aol.com		<u> </u>	Mary Lynn Wolfe	IS9998962			
Clinton, IA 52732 563-243-4652 Fax: 563-243-4750 wolfelawbk@aol.com							
563-243-4652 Fax: 563-243-4750 wolfelawbk@aol.com							
wolfelawbk@aol.com							

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United States Bankruptcy Court Southern District of Iowa

In re	Camilla Genora Whitaker	Debtor(s)	Case No. Chapter	7	
	VERIFICATION OF MASTER ADDRESS LIST ON PAPER (CREDITOR MATRIX)				
	I (we) declare under penalty of perjury that I (we) have read the attached Master Address List (creditor matrix), consisting of pages, and that it is true and correct to the best of my (our) knowledge, information, and belief.				
Date:	February 16, 2019 /s/ Cam	nilla Genora Whitaker			

Camilla Genora Whitaker Signature of Debtor

VER_MTRX (Rev. 04/00)

AAMS
4800 Mills Civic Parkway
Suite 202
West Des Moines, IA 50265-5265

Alliant Energy PO Box 3060 Cedar Rapids, IA 52406-3060

Alliant Energy 2001 Beaver Parkway Clinton, IA 52732

Alliant Energy 200 First Street SE PO Box 351 Cedar Rapids, IA 52406

City of Clinton Sewer P.O. Box 2958 611 South 3rd Street Clinton, IA 52733-2958

ComEd Customer Care Center POB 805379 Chicago, IL 60680

Credit Collection Services PO Box 607 Norwood, MA 02062

H & R Accounts Inc 5320 22nd Avenue PO Box 672 Moline, IL 61266-0672

Iowa American Water
PO Box 3027
Milwaukee, WI 53201-3027

Mediacom 115 S. 2nd Street Clinton, IA 52732

Mediacom 3900 26th Avenue Moline, IL 61265-4956

Mercy Home Medical Equipment 638 South Bluff Blvd Clinton, IA 52732-4742

Mercy Medical Center Mercy Health Network 1410 North Fourth Street Clinton, IA 52732-2940

Peoples Gas Attn: Customer Service 200 E Randolph Chicago, IL 60601

Portfolio Recovery Associates LLC 120 Corporate Blvd Suite 141 Norfolk, VA 23502

Progressive Insurance 6300 Wilson Mills Rd. Cleveland, OH 44143

Progressive Leasing LLC 256 W Data Drive Draper, UT 84020

Total Finance 3400 North Pulaski Road Chicago, IL 60641

Webbank/Fresh start 6250 Ridgewood ROA Saint Cloud, MN 56303